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APPLICATION NO. FILING DATE		F		FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/004,504 10/26/2001		Yi-Ren Woo			1416.03US01			4675		
TITLE OF INVENTION:	: VALVED PROSTHES	IS WIT	TH POROUS SUB	STRATE						
APPLN. TYPE	SMALL ENTITY	ISS	SUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	l \$1440		\$300		\$0		\$1740	04/07/2008	
EXAMINER		ART UNIT		CLASS-SUBCLASS						
SWEET, THOMAS		3774		623-002200						
1. Change of corresponde CFR 1.363). Change of corresponders form PTO/SB The Address form PTO/SB The Address form PTO/SB/47; Rev 03-0; Number is required. 3. ASSIGNEE NAME AT PLEASE NOTE: Unkneed the Address forth PLEASE NOTE: Unkneed the Address for	(1) the names of a or agents OR, alter (2) the name of a registered attorney 2 registered patent listed, no name with the PATENT (print of the patent).	of a single firm (having as a member a orney or agent) and the names of up to patent attorneys or agents. If no name is ne will be printed.								
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Authorized Signature	Hallie A. Hallie A.		MUCAI Icane			Date Registration N	<u>il</u>	<u>Z, Zoo.</u> 33,172	8	
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